

St. James' Settlement
 The Pilot Scheme Use of Hotels and Guesthouses as Transitional Housing
 Social Housing Project
 James' Residence
 Application form

Notes:

- Applicant should read "Application Guideline" carefully, understand and agree the mission and values of the project, application's eligibility and selection criteria.
- Applicant may apply through online, or download and fill in the application form, and submit by email (housing@sjs.org.hk) / in person / by post to 12/F, 85 Stone Nullah Lane, Wanchai.
- St. James's Settlement (SJS) reserve the right to change, update or withdraw any application content at any time without notifying applicants. SJS will not have or accept any liability, obligation or responsibility whatsoever for any loss, change, update or withdrawal from the application.
- SJS will invite eligible applicant and family members by random drawing for interview. SJS staff will contact the drawn applicant for interview and applicants are required to provide relevant document.
- All application form and information will be destroyed within 3 months after application date without further notice. Applicants may apply again later.
- SJS and HKCSS reserve the rights to final decision on the arrangement on housing.
- For enquiries, please contact SJS staff by 6916 7670.

Part 1: Declaration and Consent of the Applicant and Family Members (Please tick ✓ in the appropriate box)

1	<input type="checkbox"/>	I agree and understand the application process, application materials, selection criteria, etc. of the project. I and/or family members undertake to abide by the policies and arrangements of application and allocation of the housing of the project that are or will be implemented. SJS reserves the right to the final decision on the arrangement of the housing.
2	<input type="checkbox"/>	As at the date of completing my/our application form, I and/or the family members have not owned, co-owned, entered into any agreement to purchase or held more than 50% of shares in a company which owns (directly or through its subsidiary) any domestic property in Hong Kong, mainland China, oversea;
3	<input type="checkbox"/>	I and/or family members agree that SJS may, in processing my/our application, collect my/our personal data from other relevant government departments, public/private organizations (such as but not limited to financial institutions and banks), and/or any other third party (such as but not limited to employers) possessing my/our personal data for verification and confirmation of my/our eligibility. Whilst the collection of information is in progress, the personal data contained therein may be disclosed to the abovementioned organizations and/or any other third party. I and/or family members authorize these organizations and/or any other third party possessing my/our personal data to furnish SJS with my/our personal data for the vetting of my/our application.
4	<input type="checkbox"/>	I and/or family members agree that SJS may disclose, verify and/or transfer personal data in the application form and all provided relevant documents to relevant departments, organizations or participating parties in the process, assessment and investigation of applications. All personal data will be processed in accordance with the policies of SJS from time to time and the Personal Data (Privacy) Ordinance.
5	<input type="checkbox"/>	I and/or family members agree that the information provided in this Application Form may be used by SJS for statistical survey or research.
6	<input type="checkbox"/>	I declare that the information provided by me and/or the applicant on behalf of myself in this application form and other information submitted/to be submitted for this scheme is true and correct. I understand that if I make false statements or cover up information knowingly or willfully, or any other means to mislead SJS, I may be prosecuted and immediately lose eligibility for application, and may be required to immediately cease to use the housing unit under the project. I understand that it is a criminal offence to obtain my and/or my family members' eligibility of application under the scheme by deception by means of provision of false information or failure to provide the required information.
7	<input type="checkbox"/>	I understand and agree that I need to move out of the unit after the completion of the project or receive the Public Rental Housing unit.

8	<input type="checkbox"/>	I understand and agree that except for me and/or my family members listed in this application, the third parties cannot exercise any power under the Contracts (Third Party Rights) Ordinance (Chapter 623) to enforce the terms and conditions of this application and/or the relevant agreements, or enjoy the benefits under the terms and conditions.
---	--------------------------	---

Part 2: Information of Applicant

Type of unit:	<input type="checkbox"/> 1-person room	<input type="checkbox"/> 2-persons room	<input type="checkbox"/> 3-persons room
Location: (Allow multiple selection)	<input type="checkbox"/> Jordan <input type="checkbox"/> Wanchai		

Name (CHI) : _____ (ENG) : _____
Phone no. (Home) : _____ Phone no. (Mobile) : _____
Address : _____

Part 3: Information of applicant and family members

Total number of applicants (including main applicant and family members):				<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
	Applicant	Family Member 1	Family Member 2			
Name (CHI)	---					
Name (ENG)	---					
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female			
Date of Birth (DD/MM/YY)(Age)	/ / ()	/ / ()	/ / ()			
Type of Identity ¹	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6			
HKIC No. (the alphabet letter(s) and the first four digits i.e. A1234)	-----	-----	-----			
Relationship with Applicant	Applicant					
Residence of Duration in HK	___ year(s) ___ month(s)	___ year(s) ___ month(s)	___ year(s) ___ month(s)			
Marital Status	<input type="checkbox"/> Unmarried <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorce <input type="checkbox"/> Widowed <input type="checkbox"/> Others	<input type="checkbox"/> Unmarried <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorce <input type="checkbox"/> Widowed <input type="checkbox"/> Others	<input type="checkbox"/> Unmarried <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorce <input type="checkbox"/> Widowed <input type="checkbox"/> Others			
With pregnancy of 16 weeks or more, please "✓"	<input type="checkbox"/> Yes, pregnant period: () <input type="checkbox"/> No					

¹Type of Identity: 1. HK Permanent Identity Card; 2. HK Identity Card; 3. HK Birth Certificate (for under the age of 11 years); 4. Re-entry Permit; 5. Identity for *visa* Purposes; 6. Permit for Proceeding to HK and Macao (One-way Permit)

Wheelchair for mobility	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Chronic illness / disabled / (please specify)	_____	_____	_____
Any social service is receiving? (If any, please list out the type of service(s): family support service, children and youth service, community service or elderly day care service, etc.)	1. <input type="checkbox"/> Yes (Please specify: _____) 2. <input type="checkbox"/> No	1. <input type="checkbox"/> Yes (Please specify: _____) 2. <input type="checkbox"/> No	1. <input type="checkbox"/> Yes (Please specify: _____) 2. <input type="checkbox"/> No
Please tick <input checked="" type="checkbox"/> in the box <input type="checkbox"/> , if he/she is child with special educational need (please specify)	--	<input type="checkbox"/> (_____)	<input type="checkbox"/> (_____)

Part 4: Current Living Condition (Please tick in the appropriate box)

Type of residence : <input type="checkbox"/> Subdivided Unit <input type="checkbox"/> Rooftop Structure <input type="checkbox"/> Industrial Building <input type="checkbox"/> Coffins <input type="checkbox"/> Cubicle unit / Bed space unit <input type="checkbox"/> Internet Cafe <input type="checkbox"/> Street-sleeping <input type="checkbox"/> Others: _____		
Current living district: <input type="checkbox"/> Central and Western <input type="checkbox"/> Eastern <input type="checkbox"/> Southern <input type="checkbox"/> Wanchai <input type="checkbox"/> Kowloon City <input type="checkbox"/> Kwun Tong <input type="checkbox"/> Sham Shui Po <input type="checkbox"/> Wong Tai Sin <input type="checkbox"/> Yau Tsim Mong <input type="checkbox"/> Islands <input type="checkbox"/> Kwai Tsing <input type="checkbox"/> North <input type="checkbox"/> Sai Kung <input type="checkbox"/> Sha Tin <input type="checkbox"/> Tai Po <input type="checkbox"/> Tsuen Wan <input type="checkbox"/> Tuen Mun <input type="checkbox"/> Yuen Long		
Duration of current living unit: _____ year(s) (or/and) _____ month(s)	Usable area of current unit : _____ (ft ²)	No. of family members : _____
Average monthly rent in past 6 months (excluding water and electricity bill) : HKD \$ _____		Average monthly water and electricity bill in past 6 months : HKD \$ _____

Part 5: Public Rental Housing Waiting Status (Please tick in the appropriate box)

Apply for public rental housing (PRH): <input type="checkbox"/> Yes <input type="checkbox"/> No		
Application date for Public Rental Housing : ____/____(YY/MM) Duration of waiting time: _____(in months)		Public Rental Housing application no : _____ No. of applicant(s) applied : _____
Selected District	<input type="checkbox"/> Urban (including Hong Kong Island and Kowloon) <input type="checkbox"/> The New Territories (including Tuen Mun, Yuen Long, Tin Shui Wai, Sheung Shui, Fanling and Tai Po)	<input type="checkbox"/> Extended Urban (including Tung Chung, Sha Tin, Ma On Shan, Tseung Kwan O, Tsuen Wan, Kwai Chung and Tsing Yi) <input type="checkbox"/> The Islands (excluding Tung Chung)
During waiting period, I /and my family member: 1) <input type="checkbox"/> has <input type="checkbox"/> has not, changed any information in application form, for instance editing family member, flat allocation scheme or choice of district), (Please specify the changed information: _____) 2) <input type="checkbox"/> has <input type="checkbox"/> has not, investigated by Hong Kong Housing Authority about eligible of flat allocation; 3) <input type="checkbox"/> has <input type="checkbox"/> has not, accepted the housing allocation of Hong Kong Housing Authority (_____ time (s))		

Part C. INCOME & NET ASSET VALUE (in Hong Kong Dollars)

	Applicant	Family Member 1	Family Member 2
Working Status	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Unemployed <input type="checkbox"/> Retired <input type="checkbox"/> Homemaker <input type="checkbox"/> Studying	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Unemployed <input type="checkbox"/> Retired <input type="checkbox"/> Homemaker <input type="checkbox"/> Studying	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Unemployed <input type="checkbox"/> Retired <input type="checkbox"/> Homemaker <input type="checkbox"/> Studying
Occupation / grade			
Average monthly income ² in the past 12 months	(A)	(B)	(C)
Total Monthly Household Income in the past 12 months = (A)+(B)+(C) = \$ _____			
Family Monthly Subsidies from government	<input type="checkbox"/> 1. Comprehensive Social Security Assistance (CSSA) \$ _____ <input type="checkbox"/> 2. Old Age Allowance \$ _____ <input type="checkbox"/> 3. Normal / Higher Old Age Living Allowance \$ _____ <input type="checkbox"/> 4. Normal / Higher Disability Allowance \$ _____	<input type="checkbox"/> 5. Working Family Allowance \$ _____ <input type="checkbox"/> 6. half grant / full grant Textbook Assistance \$ _____ <input type="checkbox"/> 7. Others : \$ _____	
Total family monthly Subsidies from Government \$ _____ per month (average monthly subsidies in the past 12 months)			
Net Asset Value of the Household ³ (Hong Kong/Mainland China/Oversea) (Relevant Declaration Forms are required)	<input type="checkbox"/> 1. Bank Deposits \$ _____ <input type="checkbox"/> 2. MPF \$ _____	<input type="checkbox"/> 3. Properties \$ _____ <input type="checkbox"/> 4. Other type of asset \$ _____	
(1+2+3+4) Total Net Asset Value of the Household : \$ _____			

¹ Subsidies from Government, salary, allowance/tips, commission, pension, landed properties/non-landed properties (i.e. taxi) rental income, financial support from relatives/friends not living together, maintenance fee received for divorce, injured employee periodical payments, etc.

² Land, Landed Properties (domestic properties, shops, parking spaces, etc.), Vehicles, taxi/public light bus licenses, investments(saving funds, funds, shares, etc.), Business undertakings (whether with business registration or not), Loan to others.

Part 7: Plan of moving out

If a public rental housing flat is not allocated till the expiry date of residence of the project, what is your / family' s member' s plan of moving out?

Part 8: Referral by Social Service Agency (if any)

Name of referee (Position): _____ (_____) Contact no.: _____

Name of organization/unit (if any) : _____ Email address: _____

Part 9: Transferal of personal data and consent

I and/or family members agree that if the application is not admitted, all information on application form can be transferred to other organizations launching Social Housing scheme. Corresponding staff is allowed to contact me considering other transitional social housing flat.

I and/or family members declare that all information provided above is true and correct to my best knowledge. If I am found to provide false, I will be disqualified. I understand the agency would protect my personal privacy and the information I provided would not be released to third party and with appropriate security safeguard. All personal data will be destroyed after completion of the project.

If I and/or family members are not arranged any interview within 3 months after submission of this form, I consider my application unsuccessful. No further notification will be given.

The Applicant and all family members aged 18 or above who are listed in Part 2 are required to sign below.

The Applicant shall be held liable for the data of family member(s) aged below 18 furnished herein.

	Name	HKIC. No. (the alphabet letter(s) and the first four digits i.e. A1234)	Signature
Applicant	_____	_____	_____
Family Member 1	_____	_____	_____
Family Member 2	_____	_____	_____
Date	_____		

Part 10: Application Result (for staff only)

1. Verified information : Pass Fail Corresponding staff : _____ Date : _____
Documents not submitted: Proof of Identity Income Asset Proof of PHR
2. Interview date: _____ Score : _____ Result: Pass Fail Home visit is necessary
3. Date of Home Visit: _____ Result: Pass Fail
4. Assessment result: Admit application Fail application

Part II. Checklist of supporting documents (Originals and copies of documents must be submitted on interviewing day)

1. Identity Documents for Applicants and Family Members	
Copy of identity documents of individual family members	<input type="checkbox"/> Hong Kong Identity Card (for persons aged 11 or above). <input type="checkbox"/> Birth Certificate (for persons aged below 11). <input type="checkbox"/> One-way Permit/travel document/ passport or related supporting documents (persons who have arrived in Hong Kong for less than 7 years, documents permitting them to land in Hong Kong with the stamp showing the initial date of entry are required).
Copy of proof on family relationship	<input type="checkbox"/> Birth certificate or notary public certificate. <input type="checkbox"/> Adoption or Appointment of Guardians documents issued by judicial authorities / government departments. <input type="checkbox"/> Declaration.
Copy of documents on marital status for married persons	<input type="checkbox"/> Certificate of Marriage. For customary marriage celebrated in Hong Kong, the original of a statutory declaration. <input type="checkbox"/> For the spouse of an applicant/a family member who has no right to land in Hong Kong, a declaration specifying the same together with copy of the certificate of marriage and the identity document of his/her domicile (both front and back sides). <input type="checkbox"/> For a marriage registered on the mainland but without the relevant document, copy of the notary public certificate.
Divorced persons, unmarried single parent or widowed persons	<input type="checkbox"/> Copy of court order of divorce (for proceedings in Hong Kong, the certificate of making Decree Nisi Absolute (Divorce) (Form 6 or 7B)). <input type="checkbox"/> For applications including children under the age of 18, copy of the court order for the custody of children. <input type="checkbox"/> Copy of documents and declaration relating to divorce proceedings under process. <input type="checkbox"/> For separated cohabitees, the female should submit the original of a statutory declaration stating the date of separation after co-habitation and arrangements for the custody of child(ren); while the male should submit a copy of the court order for the custody of child(ren). <input type="checkbox"/> For deceased spouse, copy of the marriage certificate and death certificate. <input type="checkbox"/> Declaration.
Proof of Address	<input type="checkbox"/> Copy of any document bearing the Applicant's residential/correspondence address in Chinese/ English (e.g. electricity bill).
Proof of Rent	<input type="checkbox"/> Receipt of Rent and copy.
Proof of public Rental Housing application	<input type="checkbox"/> Document issued by Hong Kong Housing Authority with application number (blue card)
With pregnancy of 16 weeks or more	<input type="checkbox"/> Copy of medical proof issued by registered medical practitioners.
For having chronic illness / disabled family member	<input type="checkbox"/> Copy of disability proof issued by registered medical practitioners or recognized medical personnel.
2. Income and net asset value proof for Applicant and Family Members (in past 6 months)	
Salaried employee (with a regular employer)	<input type="checkbox"/> Self- Tax bill, salary statement issued by employer (with company name, company chop, signature of person in charge, etc.), payroll account, bankbook
Salaried employee (with no regular employer) or Self-employed person	<input type="checkbox"/> Self-declaration of salary and relevant document
CSSA recipient	<input type="checkbox"/> Copy of documents indicating the amount of Comprehensive Social Security

	Assistance and the Certificate of Comprehensive Social Security Assistance Recipients (for Medical Waivers).
Where Applicant or Family Member are on retirement, unemployed or without any employment	<input type="checkbox"/> Declaration on the source of financial support.
Record of deposit	<input type="checkbox"/> Bank account record of applicant and family member(s), such as bankbook, monthly bank statement, etc.
Leased/ Vacant land/landed properties	<input type="checkbox"/> Copy of the latest demand note for rates and government rent. <input type="checkbox"/> Declaration.
Other sources of income (dividends, bonus, dividends/giving-outs of insurance policies, regular interest on fixed deposits, pension, contributions from relatives, etc.)	<input type="checkbox"/> Copy of pension documents. <input type="checkbox"/> Declaration.